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U.S. PATENT & TRADEMARK OFFICE

Attorney Docket No.	AUS920010770US1 (9000/76)
Application Number	10/007,063
Filing Date	NOVEMBER 8, 2001
First Named Inventor	PRABHAKAR GOPALAN
Group Art Unit	2178
Examiner	HONEYCUTT, KRISTINA B.

ENCLOSURES (check all that apply)

<input type="checkbox"/> Amendment	<input type="checkbox"/> Assignment Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> After Final	<input type="checkbox"/> Drawings:	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> After Allowance Communication to Group	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input checked="" type="checkbox"/> Post Card Receipt
<input type="checkbox"/> Petition for Extension of Time Request (dup)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Applicant Initiated Interview Request Form	<input type="checkbox"/>
<input type="checkbox"/> Supplemental Information Disclosure Statement, PTO-1449, art	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input checked="" type="checkbox"/> Express Abandonment Under 37 CFR 1.138	<input type="checkbox"/>
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Request of Refund	<input type="checkbox"/>
	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 09-0447 (IBM Corporation). A duplicate copy of this sheet is enclosed.	
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					Small Entity		Large Entity	
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Total		Minus		0	x \$25=	0	x \$50=	
Indep.		Minus		0	x \$100=	0	x \$200=	
First Presentation of Multiple Dep. Claim					+\$180=	—	+\$360=	
					total add'l fee	\$ 0	total add'l fee	\$ 0

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	FRANK C. NICHOLAS Registration No. 33,983 CARDINAL LAW GROUP 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201
Signature	
Date	April 28, 2005

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FRANK C. NICHOLAS (33,983)



PTO/SB/24 (06-04)

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